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THE

‘DESTRUCTIVE ART OF HEALING;’

OR,

FACTS FOR FAMILIES.

BY THE AUTHOR OF

“FALLACIES OF THE FACULTY.”



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FACTS FOR FAMILIES.

A CONSIDERABLE time has now elapsed since the writer of these pages first had the temerity to question certain articles of Medical Faith, which—though then and previously very universally received as the sublime of orthodoxy by his own profession—appeared to him to be little better than a mere tissue of the most glaring sophisms. In this latter light, accordingly, he submitted them to the world, first in one publication, then in another, but more particularly in his matured work, “THE FALLACIES OF THE FACULTY.” In the same volume he moreover developed, at greater length than he had yet done in any of his previous writings, a new Doctrine of Disease, together with a new and more simple Doctrine of Treatment for all Disorders than had hitherto prevailed. These new doctrines, for reasons hereafter to appear, he determined should be called the CHRONO-THERMAL SYSTEM OF MEDICINE.

And first as to the “Fallacies” of the Faculty. It is a “fact”—and no fact can be better attested—that, however greatly particular doctors might differ one from another in certain details of every-day treatment, the Faculty, till very recently, were almost to a man unanimous as to the efficiency of many measures which numbers of themselves *now* admit to have been a mere string of the most egregious errors. Right or wrong, at the epoch we speak of, not only were the measures, now so very generally condemned, the all but universal practice, but for upwards of twenty centuries one and all of them had actually been received as the approved ground-work of the Healing Art. From time immemorial, for example—in the *outset* of diseases at least—it had been the established practice of medical men to reduce the vital force of the system by every means in their power; and more especially had it been their custom thus to reduce it by abstracting and otherwise diminishing the *reparative material* of the entire organic economy, by a variety of processes, all more or less repulsive to the unfortunate patient. Having first, in almost every

case, duly stopped *income*—the food and drink—and wasted *capital*—the blood and the elements of the blood—no man was considered a “competent physician” who did not further very carefully multiply by a general rule of three the normal *expenditure* of the Healthy Body!

The ostensible object of all this practice—latterly called the “Antiphlogistic Practice”—according to the schools, was to prevent or cure INFLAMMATION, most diseases being supposed to partake of a hypothetic inflammatory character. But of all those so-called antiphlogistic measures, the highest in rank with the most eminent doctors was BLOOD-LETTING. “In all cases of inflammation,” says a great living professor—Professor Alison, of Edinburgh—“in all cases of inflammation, the only antiphlogistic remedy on which absolute reliance can be placed is *Blood-letting*; and there is no other remedy for *any other kind* of diseased action which can be put in competition with *this* in *efficacy* and *importance*.”

In so far as regards Blood-letting, at least, Dr. Alison merely echoed the prevailing opinion and prevailing practice of the profession at large. But, at the period we speak of, Blood-letting was far from the only “antiphlogistic” measure on which reliance was placed as a remedial means; for, even so late as 1836, Mühry, a German physician, who came to England expressly to see British practice, thus writes: “Mercury, purging, and blood-letting, are the three leading therapeutic means in England.” “The English practitioners hold the human system to be so constituted that it can bear a *considerable loss* of blood.” “Even in chronic inflammation bleeding is much depended on.”—*Mühry’s State of Medicine in France, England, and Germany, in 1836.*

For upwards of twenty-three centuries to starve, bleed, and purge, had been the all but exclusive business of the man of medicine. From the days of Hippocrates till within the last few years this was the undoubted practice in almost all diseases. Mathematically considered, the whole thing might seem absurd; and when rigorously tested by *statistics*—as has been since done in particular diseases—the absolute negation of all practice could not show such a fearful fatality of result! But at the period in question there were no statistics; dead men then, at least, proverbially told no tales; and as those who were so fortunate as to *escape* this terrible medical ordeal were invariably reminded by the doctor how thankful they ought to be for their *cure*, the majority of patients seldom expressed themselves ungrateful for anything that had been done to them in the course of their illness. In truth, what from the gloom of the sick room, and what from the obscurity that enveloped the science, no question was ever asked by the public at large about medical matters.

No doubt, in fact, existed in people's minds as to the general excellence of an art which their physicians, with a great display of truth, assured them had been the offspring of the accumulated medical experience of ages. Here and there, nevertheless—among thinking and reflecting men—philosophers, poets, and satirists—an opinion was gradually growing up unfavourable to the professors of medicine, from Shakspeare, whose advice was to “throw physie to the dogs,” to Byron, who himself fell a victim to what he too truly termed the “Destructive Art of Healing.” But till the year 1836, when, as Mühry is careful to relate, the sanguinary practice, in England at least, still continued in the ascendant, it never seemed to have occurred, even to physicians themselves, that there could be anything materially erroneous in their general method of treating diseases. The year 1836, however, was destined to be the commencement of a most momentous epoch in the history of medicine. In the autumn of that year the present writer first startled the profession by the announcement of his work, “*THE FALLACY OF PHYSIC, as Taught in the Schools; with New and Important Principles of Practice.*” Contrary to all the greatest doctors, whether of ancient or modern times, the author of this volume maintained that the blood, in the impressive language of Scripture, being “the life of the flesh,” instead of depleting and lowering the system, in the treatment of disease, the preservation of this most precious of the fluids, by every possible means, ought to be a primary object with both surgeons and physicians. Further, in the teeth of the whole tribe of doctors, he held that all diseases—even *local* diseases—erroneously so called—being each and every of them more or less febrile and fitful, and more or less periodic and intermittent in their nature—each and every of them ought, from the first onset, to be combatted by the very opposite of depletion—bark, iron, wine, and other remedies of a conservative and constitutional kind. Undeterred by the obloquy he met on his first assailment of the whole fabric of British medicine, the author of “The Fallacy of Physic,” a year or two afterwards, still further developed his new doctrines in his work, “*The Unity of Disease;*” which treatise he followed rapidly up by his more popular volume, “*The Fallacies of the Faculty, with the Chrono-Thermal System of Medicine.*” Upon the laity, at least, this last publication fell like a thunder-bolt; edition after edition was called for; translations and foreign reprints appeared in quick succession, and men at length began to wonder how they possibly could have so long trusted their health and their lives to the tender mercies of a profession composed, for the most part, of school-bound formulists and unmitigated pedants!

Distrusted by the public, numbers of the profession, in various

parts of England, now for the first time began seriously to distrust themselves. "Statistics" or numerical comparisons were appealed to, and, to the astonishment of the most eminent practitioners—as we had again and again predicted—even in apoplexy and diseases of the chest, blood-letting was found to increase, by three to one, the fatality observable in cases where the operation was *not* practised! Hence many great and most desirable changes in the practice of medicine—changes all more or less in accordance with our own heterodox views of disease and its treatment! In place, for example, of bleeding, leeching, and otherwise lowering the vital force of the sick, certain physicians now began to give bark, iron, and wine, in cases where they themselves would formerly have expected the most disastrous consequences to be the result of such a plan. At a still later period some of the more eminent surgeons also found it imperative—in order to retain the confidence of the public—to turn over a new leaf. How one, at least of the most distinguished of these "eminent tragedians," has trimmed, the reader will see in the sequel.

Of the many living *medical* professors who had, previously to this time, published practical works on disease and its treatment, several of very high reputation have openly acknowledged their errors. Some, on the contrary, without any such acknowledgment, have, on one pretence or another, not been ashamed to unwrite all they had once advocated in former editions of their works. Not the least conspicuous of these is Dr. Alison, of Edinburgh—the same Dr. Alison who, the reader may remember, actually at one time held blood-letting to be a universal remedy. Strange as it may appear, the Edinburgh professor does not now bleed even in inflammation of the chest! Nor is he alone in this wonderful change, Dr. Marshall Hall, Dr. Watson, Dr. Copland, Dr. Todd, and other great London physicians, having all very recently, more or less, come round to the opinions and practice we ourselves were the first to propound, and for which, in the first instance, we experienced so much bitterness and hostility. Even among the surgical writers we find examples of a similar self-stultification. Witness Sir Benjamin Brodie, in his own favourite field, in the field where he has so long reigned as the first of authorities—the "Diseases of the Joints and Spine." Not till, in his own opinion at least, he had very satisfactorily tested his views by the experience of a certain number of years of hospital and private practice, did Sir Benjamin—then Mr.—Brodie feel justified in publishing his first work on these complaints. Mr. Brodie came out as an authority on spinal and joint complaints for the first time in 1813. Then, for the guidance of students and young surgeons, he recommended

bleeding, leeches, cupping, calomel, setons, and caustic issues, as the best treatment of both disorders. And so satisfied was he with the "advantageous" results of that treatment, even so late as 1834—after, in fact, TWENTY-ONE YEARS FURTHER EXPERIENCE of hospital and private practice—he still held that nothing better could be done. Certain at least it is, in an edition of his work published that year, Sir Benjamin Brodie did not think it necessary to make any alteration in his treatment of joint and spine diseases, by leeches, calomel, and cupping—using these measures *then* even in cases of "chronic inflammation." And in so far as setons and caustic issues were concerned, this great surgeon still continued to express himself perfectly pleased with the "singular benefit" resulting from these "advantageous" remedies. Nor did "THE UNITY OF DISEASE"—a copy of which work we sent him a few years afterwards—seem at first to convince him that one and all of his own boasted measures were a blunder and a barbarism throughout. Twelve or fourteen years later Sir Benjamin Brodie had discovered his error. In 1850—reader, mark the date—the Chirurgical Baronet brought out a new work, which he was pleased to call the "sixth edition" of his "Diseases of the Joints and Spine, with *Additions and Alterations*." Many and great are the "alterations" here. In this new *edition*—if new edition it can be called—Sir Benjamin Brodie completely abandons every one of the more prominent measures on which he had, for upwards of *thirty* years, very particularly plumed himself; while the "additions" with which he couples his "alterations"—if the truth may be told—are neither more nor less than so many simple "subtractions" from the pages of a writer he and his friends had for years affected to despise, as "the blockhead who wrote '*The Fallacies of the Faculty!*'"

What does Sir Benjamin Brodie do and say in his new edition about the diseases of the joints and spine? One and all of them, he now assures us, grow out of previous constitutional disorder. In every and each of his *five* former editions he speaks of these diseases as mere local diseases, to be best treated by local depletory means. This mistake of his "early life" he now corrects. "A more enlarged experience," he confesses, has satisfied him that, in common with the great majority of so-called local diseases, the diseases of the joints and spine grow out of "some *antecedent* morbid condition, either of the nervous or circulating system." Indeed, in not a few cases he has witnessed (he tells us) certain *periodical* changes, certain "alternations of temperature," which affect the diseased joints "as regularly as an *ague*." Therefore, totally discarding every depletory measure whatever, Sir B. Brodie now treats all diseases of the joints and spine by

bark (quinine), iron, and other febrifuge medicines; while the setons and caustic issues, which, even in his edition of 1834, he tells us he had in most cases found to be very "ADVANTAGEOUS," and of "SINGULAR BENEFIT" to his patients, he now stigmatises as the "PAINFUL and LOATHSOME" measures with which he had been silly enough to "TORMENT" them, like other young men, during the juvenility of his "early life." His early life!

"Angels and ministers of grace defend us!
Be thou a spirit of health, or goblin damned?"

In 1834, when, by his own showing, Sir B. Brodie still continued thus to "torment" almost every poor creature who consulted him, whether for spinal or joint disease—he was already a great surgeon, and had been in practice nearly *thirty* years—in 1834 he had actually taken the last look of the sunny side of *fifty*—he was upwards of half a century old! That year, too, for his particular skill in spinal complaints, he was created a Baronet! What a mistake! as we now learn from these "alterations and additions," every one of which this consistent gentleman most conscientiously apprises his readers has been simply the result of his own "more enlarged experience:" carefully remembering, doubtless, Lord Bacon's advice, "Always when thou changest thine opinion or course, profess it plainly, and declare it openly, *together with the reasons that move thee to change*, and do not STEAL it."

"THE UNITY OF DISEASE" was on Sir Benjamin Brodie's table, but he had read it not—he had other avocations than to read "such stuff;" its contents he could only know from hearsay. That is why he had so long laughed at doctrines which he now looks upon as essentially his own. The world knows not how much it is indebted to Sir Benjamin Brodie for these results of *his* "experience!"

We have elsewhere pointed out some errors—grave errors—in Sir Benjamin Brodie's *present* practice. Considering the late age at which the eminent Baronet adopted his "alterations and additions," it would have been too much to expect that his novel practice could admit of the perfection it might have reached had he really commenced it in his "early life." In that case he could scarcely have advised us as he does, in his "edition" of 1850, to confine certain patients to the horizontal posture for the long space of "two or three years," and keep them all that time on one remedy—iron! Imprisonment to the couch and a course of iron for two or three years! That error, at least, we may safely expect Sir B. Brodie to rectify with a little more of his own "more enlarged experience."

Having allowed this distinguished *surgeon* to account for his

change of practice in his own way, we must now spare a little room for the recantations of other equally eminent *physicians*. Very different have been the reasons given by Professor Alison, of Edinburgh, for *his* adoption of a new course. With Dr. Copland, Dr. Watson, and other English physicians of mark, Professor Alison ascribes *his* change of practice to "a change in the *TYPE* of disease." According to these gentlemen, Human Nature has completely altered within the memory of the present generation; nay, within the last ten or twelve summers it is not what it was;—why or wherefore, no two of these three great doctors can agree. By one very distinguished physician we are called to believe that the "malaria from the wood pavement has caused all diseases to assume an *intermittent* type." Another will have it that the gradual substitution of "tea and potatoes" for ale and animal food in the diet of the people, has very sensibly "mitigated the ferocity" of all complaints. Indeed, certain gentlemen, with the eminent Dr. Alison at their head, assure us that the diseases even of horses, asses, and horned cattle, have also, all within the present century, been materially changed. By "tea and potatoes?" No; but "somehow or other." Many doctors, nevertheless, declare with Dr. Watson, that the human constitution has been certainly altered since the cholera came to England in 1832. According to these last, the cholera has not only altered the constitutions of those it attacked, but it has, "somehow or other," completely changed the constitutions of those it never attacked at all! But whatever be the true theory of the cause of this "change of type," nothing is more certain than that the people of these degenerate times "cannot bear depletion as they formerly did;" for that fever, small-pox, chicken-pox, and the like, are no longer the "inflammatory" complaints they used to be. Even epilepsy, palsy, and apoplexy—according to certain gentlemen—can no longer be treated "antiphlogistically." These diseases, now-a-days, can only be cured by quinine, iron, and other febrifuge remedies. So changed, in a word, has become the type of all diseases, the most sanguinary surgeons—Mr. Guthrie, perhaps, excepted—can by no possibility adopt the lowering measures they adopted within the last dozen years in cases of accident—broken heads and broken bones, for example—not in these islands only, but all throughout the civilized world!

People of England, is this the truth? Is this the honest belief of men in whom you have so long confided as examples of probity and honour? Or—is this assumption of a change in the type of disease a mere shallow artifice on the part of solemn impostors, who wish to rob the discoverer of his reward, and filch from him the profits of a conservative practice, they them-

selves have for years vilified and denied? *Can* the TYPE of disease change? Is such a change probable, or even possible? Every known fact in creation answers, "*Forms* may change; *Types* are immutable!"

Let us consider the functions of a healthy human body, as they are, were, and, till this globe shall come to an end, must, in the very nature of things, continue to be!

In the first place, then, a healthy man will be found to be a *regular* man; in every act of his life you will find him keeping time almost like the clock. Such a man scarcely requires a watch to tell him when to rise or when to go to bed, when to work or when to play. Even in his interior economy every organ and atom preserve a regular rhythm in all their movements. The beat of his heart and the play of his lungs, on all but extraordinary occasions, keep an all but musical time; his corporeal income and expenditure very periodically balance each other. From the cradle to the grave his life—his whole life—is little more than a mere series of periodic repetitive acts. Thus, a healthy man may be said to be a walking chronometer; while, in so far as heat and cold are concerned, he requires no thermometer to regulate his temperature. It is the sick only who trouble themselves much about their feelings in either respect. *Chrono*-metrically and *Thermo*-metrically the healthy man is all right. In him we behold an epitome or embodiment of every great system in nature. The entire system of his frame, like the entire frame-work of creation, is a veritable CHRONO-THERMAL SYSTEM! In this, at least, there is no mistake; there can be no quackery here; for the man who comes up to *Time* (Chronos) in all the acts of life, and who, during every season of the year, preserves throughout his body a sense of equable Temperature (Therma), requires no doctor to regulate what already is regular in all its actions. Attention to TIME and attention to TEMPERATURE must, therefore, be the object and aim of all rational medicine when such a man becomes sick, call his complaint by what name we please. Can such a system of medicine be learnt by the anatomist in the dissecting-room? or by the mere chemist in his laboratory? No! It is to the living Brain and Nerves—to the *cerebro-nervous* system—that source of all motion and emotion, the practitioner who would regulate either the temperature or the time of the disordered living man must direct his chief attention. The physicians of India and China, who never open a dead body, and who know nothing of chemistry, at this very hour practise medicine with a success that might greatly astonish some of the most accomplished anatomical and chemical professors of this country.

In all places, simples have preceded science in the practice of the Healing Art. By very simple means, for example, a Peruvian peasant accidentally cured himself of a disease, to the reiterated paroxysms of which, in defiance of the best medical advice of this country, the stalwart Cromwell was forced to succumb. Before the introduction of the Peruvian bark by the Jesuits, thousands of our countrymen annually perished by Cromwell's disease—the AGUE,—fell victims, in a word, to the physician's ignorance of the very nature of intermittent Fever. The rapidity even with which the bark can in most cases put an end to the paroxysms of that complaint, instead of being a recommendation, in the first instance, greatly retarded the success of the new remedy with the majority of the profession, who, being paid for *time* instead of for *talent*—how long will such a system continue?—naturally opposed it with all the vehemence of bigotry, and all the virulence of self-interest. A generation of doctors had to pass away before the Jesuits' bark—that “invention of the devil”—fully established itself as a cure for Intermittent Fever. But, with all their science, and with all their search, the professors of Europe had never been able to explain how a disorder involving—as the ague confessedly does involve—*every organ and atom* of the body, should yield to a vegetable principle, at first sight so apparently powerless and inert. Nor did their discovery even of the active element of the bark, *Quinine*, enable them to give anything like a satisfactory explanation either of the mode of action of the remedy, or the nature of the disease which it cured. It was reserved for the present writer to explain both. In the phenomena of the Ague-fit—in the paroxysm of Intermittent Fever—he discovered not only the *type* of all fitful complaints, but the type of every other known *form* of disease; while in the action of the Peruvian bark on the *Brain*, in the cure of that particular convulsion, he found a key to the true mode of action of all remedial means.

Abstractedly speaking, there is but one Health and one Disease!

Many and various, it is true, are the supposed *partial* complaints, which medical men usually term “local disorders;” but, strictly speaking, local disorders are so rare that, for ourselves, with the exception of a few mechanical diseases, we scarcely know a so-called local complaint that we have not cured by constitutional internal means. The writer of these pages claims the merit of having himself been the first to show that the greater number of so-called local diseases gradually grow out of a great *antecedent*, though sometimes *coincident*, febrile CONSTITUTIONAL WRONG. When analyzed, such constitutional disturbance, he contends, *whatever be its cause or causes*, clearly

resolves itself into an aguish or febrile movement of every organ and atom of the entire body,—intermittent and fitful like the ague, and, like it, attended with alternations of temperature and other phenomena, all more or less *periodic* in their character. In Disease, as in Health, every animal body, he maintains, betrays this tendency to repeat and keep time. Were not the greater number of human complaints of this intermittently febrile or true constitutional kind, how could bark or iron, internally administered, cure such complaints as “diseases of the joints and spine,” to say nothing of tic, tooth-ache, tumours, and eruptions? The greatly altered treatment of one and all of these various diseases, within the last few years, is itself a proof of the magnitude of the revolution the Chrono-Thermal doctrine has already effected in the opinions and practice of medical men all through the country. Since its first announcement in 1836, there is scarcely a curable disease which has obtained a name that has not, even in the hands of others, in numberless instances, yielded to Iron or Bark. The admission of this one fact not only stamps the **UNITY OF DISEASE** as a truth, but establishes beyond question the unity of action of all remedies on the brain and nerves. The brain is the electric telegraph of the body. The nerves are the wires by which it transmits and receives impressions to and from the most distant parts. Through this brain and through these nerves only, can *morbid* impressions be made on the body; and upon this brain and upon these nerves also, in the first instance, do bark, iron, and the greater number of remedies in reality act. One and all of them act by inducing, like the passions, a new movement of the cerebral atoms. Lives there the practical physician who will deny the possibility of any kind of constitutional disease being caused or cured by any one of the passions or emotions? The very fact of a mental emotion curing or causing any given form of disease at once stamps that particular disease at least as a true constitutional complaint. We know no disorder that has not been caused, and in numerous instances *cured*, in this manner. Gout, tic, toothache, palsy, epilepsy, fever, ague, melancholia, mania, have all, in our experience, been caused and cured by mental impressions. These diseases, one and all, then, are febrile diseases. What is mania but a chronic delirious fever? and its “lucid intervals” but mere *intermissions* between the paroxysms of a fever which so many of the mad-doctors, partly from ignorance, and partly from interest, continue to this hour to mistreat! A fit of mania is as common a saying as a fit of the ague; and few of the laity, at least, who, like ourselves, have seen the maniac with aguish cheek or flushed forehead, will demur to the explanation we have here given of *this*

particular disease. A fit of palsy, a fit of gout, a fit of rheumatism, a fit of colic, nay, a fit of the stone, were expressions in everybody's mouth long before "the malaria from the wood pavement induced all diseases to take on the periodic type!" Equally fitful are the greater number of human diseases. Yet not till the year 1850 did Sir B. Brodie for one appear to recognise the "alternations of temperature" which "periodically affect the joints," in the particular diseases on which he had been occupied all his life long. During thirty years, at least, that eminent surgeon was evidently in complete ignorance of the intermittency of the phenomena of joint diseases! But even in 1850 Sir Benjamin Brodie says nothing of the malaria from the wood pavement, which Dr. Copland so gravely assures us has, in London at least, turned the practice both of surgeons and physicians completely topsy-turvey. If we believe Dr. Copland, there was no such thing as a general periodicity of disease till 1826 or '27. Before '26 or '27 that distinguished medical writer will have it that the greater number of diseases were "continuous" and "inflammatory." Therefore, according to Dr. Copland, bleeding, repeated and re-repeated, even to the point of death, was, in chest disease more particularly—till this epoch,—the *sine qua non* of remedies. Then, too, according to him, for the first time quinine and bark required to be substituted for bleeding in the diseases of that cavity. Why did Dr. Copland delay till 1844 to announce his discovery of that "fact?" And how came Dr. Watson—"the great authority" of the London apothecaries—even so late as 1845, to recommend, in his "Practice of Physic," bleeding, leeching, and cupping, for almost all complaints? In 1845, Dr. Watson still held that, except in ague, and a few other diseases clearly traceable to "*atmospheric malaria*," or "*marsh miasma*," there could be no such thing as periodicity. The "malaria from the wood pavement," notwithstanding its announcement by Dr. Copland at the Westminster Medical Society the year before, Dr. Watson does not once mention in either of his two ponderous tomes.

To clear away a given folly, in a country like England, is too often, unfortunately, only to make room for some other folly equally egregious. This has been the case in medicine. Just as we had brought a considerable number of physicians to adopt our own views of the true constitutional origin of diseases, a class of doctors sprung up who will have it that in *female* complaints, at least, there must ever be more or less of *local* wrong, which no possible constitutional treatment can cure! Whispering mysteriously the words "engorgement" and "enlargement," "changes of position" and "misposition," "version" and "retroversion"—phrases which, till very recently, were never heard in

an English sick room—these people straightway proceed, with speculum, caustic, and other shocking appliances, to perform their beastly operations,—operations dangerous alike to the moral and to the physical well-being of their patients. Men of England! if you only knew what your wives and daughters *needlessly*—mark that word!—needlessly experience at the hands of those quacks, your brows would burn with shame and indignation. How such brutality as these creatures practise ever came to pollute our shores, is one of the miracles of the times. A proper feeling in the minds of our women should have preserved them from the humiliation and torture to which they have been subjected; while Englishmen of all ranks should have united, long ere this, to expel from the land the sordid wretches who first introduced the grossness and indecency of the hospitals of Paris to the houses and hearths of a too confiding people!

A terrible error prevails at this moment in the minds of the English people—the error of trusting to persons who write books on “particular diseases.” To a man, these practitioners are mere quacks; to a man, they practise for mere practice sake. These “specialty” doctors, as they call themselves, are generally exceedingly specious charlatans, who mystify and mistreat the public for their own special benefit only. If apoplexy and epilepsy, palsy and mania, can, like fever and ague, be *caused* by impressions affecting any of the nerves of the body, even the most distant from what is called the “seat of the disease”—the nerves of the skin or intestines, for example—why may not one and all of them be *cured* by remedies acting through the same nerves on the general constitution? By such remedies only *can* the majority of these diseases in reality be cured. Scarcely one of these complaints will yield to mere local measures. Local measures—more especially the local measures employed by the specialists—aggravate instead of ameliorate almost every case—procrastinate instead of quicken the cure. Pity it is that nothing short of a long illness pays! In the decline of the Roman Empire there was a doctor for every part of the body; the fingers and toes had each their separate doctor! We have nearly come to that pass here. A universal medical corruption reigns at this moment in England. There is no hope—there can be no hope for the sick till the sane and sound awake from their lethargy, till the laity learn to know themselves!

The present routine treatment of palsy is a mistake throughout; the present routine treatment of apoplexy and epilepsy is also a complete mistake; the present routine treatment of diseases of the chest—heart and lung disorders, for example—is, with a few exceptions, a series of mistakes. Almost every measure advocated by the writers on these “specialties” ag-

gravates the disorder. If, in the case of "diseases of the joints and spine," quinine and iron can cure these so-called local diseases, why may not the same remedies be employed with equal benefit in palsy, apoplexy, and diseases of the chest? In our own hands numerous cases of each and all of these diseases have yielded like magic to both. Cases innumerable could we give here of cures of palsy, apoplexy, and chest disease, by purely *febrifuge* means. Just look at the result of the usual sanguinary measures in palsy, epilepsy, and apoplexy! Death, or worse than death—sufferings mental and physical, for which death is a happy relief. By curing the Fever—the fitful, constitutional Fever, in which originates every one of these affections—every one of them may be more or less ameliorated. Beware of the "specialty" doctors! For upwards of thirty years of his life Sir Benjamin Brodie was a "specialty" doctor. All that time his practice—in his own specialty, diseases of the joints and spine—was a mistake; but all that time his patients never found it out. There are a great many men who now make similar mistakes in their own particular specialties, and *they* are *not* yet found out, possibly never may be found out—by their *patients*, at least. So much for poetical justice in medicine!

In the forthcoming month of September, of this present year, 1853, exactly seventeen years shall have passed since we first announced the possibility of treating very successfully all curable diseases without loss of blood. To the Profession, that "fact" was at first inconceivable. Statistics are now with us. We have now certain statistics in two diseases which even at this time numbers of the most honest practitioners will not believe can be successfully treated without bloodletting—Apoplexy and Pneumonia—Apoplexy and Inflammation of the Chest. What say the statistics of Apoplexy? Dr. Copeman transcribes from his note-book no less than 250 cases. The following are the results:—

Number bled	129	.....	Cured ...	51	.....	Died ..	78
Number <i>not</i> bled ..	26	.....	Cured ...	18	.....	Died ...	8

Which show, that in cases where bleeding was practised, two out of three died; whereas in the cases treated without bloodletting, more than two out of three recovered!

How speak Statistics in Pneumonia? Disgusted with the fatal results in inflammation of the chest treated by bloodletting, Dr. Dietl, physician to one of the district hospitals of Vienna, determined to try simple ptisans, without bloodletting at all. The comparative results, in a very large practice, were the following:—Of patients bled, 20 and a fraction out of every 100 died; of patients not bled, only 7 and a fraction per cent. gave up the

ghost. Showing a balance of three to one against bloodletting! Treated after the manner of the author of the Chrono-Thermal system, with febrifuge remedies instead of ptisans, Pncumonia will be found to exhibit results even more satisfactory than those of Dr. Dietl; and when chrono-thermally treated, Apoplexy also will assuredly give a greater per centage of recoveries than what we find in the statistics of Dr. Copeman, where bleeding was not employed.

The first English physician who in his writings adopted our own peculiar views of disease and its treatment was Dr.—now Sir Henry—Holland, Physician to the Queen. So far back as 1839, Sir Henry not only advocated the Intermittency and Periodicity of all disease, but wrote strongly against the depletory system of treatment in apoplexy. Elsewhere we have published a letter, in which the medical baronet deprecating controversy in the matter of an accusation we thought it our duty to bring against him, makes the important admission that *his* views of the intermittency and periodicity of disease are one and all “subservient” to our own “larger conclusions.” When pressed to say where he got them, he said they were suggested by some “old notes.” Old notes! These *old* notes must assuredly have contained some rather *new* ideas. By whom and from whom were they taken? Heaven only knows! This, at least, we do know—Sir H. Holland is not the only man in the profession who has shown a natural turn for—*philosophic abstraction!* Fragmentally, at least, the chrono-thermal theory of disease and its treatment has been adopted and pirated by many subsequent writers,—Drs. Laycock, Searle, Forbes, Todd, Radcliffe, Ashburner, and others, have one and all, without acknowledgment, made a common property of our discoveries in particular diseases. But no medical writer has yet exceeded in audacity a certain Dr. Robert Dundas, of Liverpool, who, in 1852—save the mark!—published a work, which he entitles, “Sketches of Brazil, including *New Views* of Tropical and European Fever.”

We shall give our readers a few specimens of these “new views.” In 1852 Dr. Dundas writes thus:

“I have *lately* looked attentively into the writings of the best modern authorities on the subject of FEVER. Here I find the various forms and the succession of the paroxysms in remittent and intermittent fever defined with a mathematical precision *unfounded in nature*, and showing that the writers [the “best modern authorities!”] had not enjoyed the opportunity of observing these diseases as they actually prevail in different regions of the globe.” “I would ask whether, irrespective of all other evidence, the specific power exercised by proper doses of *Quinine* [the active ingredient of the Peruvian bark] over all these several forms of

Fever does not afford conclusive proof that, in their essential nature, *these fevers are IDENTICAL, and differ only in form and degree.*"

From 1836 to the present hour, this "new" doctrine of Dr. Robert Dundas has been the doctrine of the present writer, over and over again reiterated in every publication to which he has placed his name. More particularly is it enforced in "*The Unity of Disease*," and "*Fallacies of the Faculty*"—which latter work has run through at least twenty editions.

But to continue our quotations:—"I apprehend, indeed, that the law of *periodicity*, or the disposition to remission and exacerbations at certain intervals, will *be found to apply more or less distinctly to all human diseases*"—[the italics here are Dr. Dundas's own], "to those arising in the most opposite conditions of the animal economy, and determined by morbid agents apparently the most dissimilar and opposite in their nature as well as in their results."

By way of confirmation of his "new views," Dr. Dundas, in the same page, commences in capital letters a "Parallel between Gout and Ague," which parallel the reader may see in our first publication in 1836!

"Behold, then," Dr. Dundas exclaims, "the citizen, flushed and rubicund, groaning under a regular paroxysm of inflammatory gout; the peasant with his sallow Hippocratic face and attenuated frame, shivering in the horrors of a paroxysm of ague. Observe them again in a few hours; both are restored apparently, and but apparently, to their ordinary health, to undergo, after a brief space, a repetition of their previous sufferings, followed by another remission. Here clearly is periodicity as distinct and well-marked in the gorged and gouty alderman as in the half-starved, aguish peasant. But it may be urged that the analogy is incomplete; that gout exhibits only a remission, the ague an *intermission*. I deny the truth of both propositions, at least so far as relates to the distinction attempted to be established between remission in the one case and intermission in the other. The term intermission (cessation or suspension of the disease), in fact, applies correctly to neither. The animal economy does not return to its healthy condition during the interval between the paroxysms of an intermittent fever, as must be admitted by every observer who has watched its progress attentively, or who, like myself, has been the subject of an attack. The same holds good in gout. In both diseases the interval between the paroxysms is marked by certain feelings of *malaise*, irritability, depression of vital power, and derangement of the secretions, as truly indicative of morbid disturbance, as the throbbing toe, the icy chill, or burning temples. Thus, then, we

perceive that in regular gout, a disease to which few will be disposed to assign a *malarious* origin [these are our own identical words!], the law of periodicity applies no less closely than it does to ague."

Reader, we are not yet done with our quotations from Dr. Dundas's "new views."

"There is a homogeneity [unity], if the expression be permitted in the laws of disease, of which we are *just now beginning* to enjoy the *first glimpses*, and although it would be too much to allege that fever and inflammation are but one and the same morbid action, greatly diversified, no doubt, through the influence of numerous concurrent circumstances, we nevertheless know that the theory of the day which rendered a special reason of the proximate cause of the *one* was deemed to be equally illustrative and explanatory of the other. The phenomena of fever, as specially distinguished from inflammation, are, I am disposed to believe, *essentially one and the same*; the *simplest expression* of that morbid action being delineated, in the paroxysm of an Ague, in the succession of its three stages—the hot, cold, and sweating; and assuming, under certain circumstances of climate, constitution, modes of living, &c., the various forms of typhus fever, plague, remittent fever, yellow fever, and all the subordinate varieties of fever denominated *essential* by the French school."

We could here quote several other passages, equally illustrative of Dr. Dundas's "new views" of the constitutional origin and febrile nature of the generality of so-called "local diseases," but we have only space for the following quotation from his preface. With this we shall conclude our extracts from Dr. Dundas's book.

"The author is well aware that these opinions are in direct opposition to those held by the profession, and he has, therefore, clearly and briefly submitted the chief evidence on which, against his own personal convictions, he was first led to doubt, and finally to reject, *doctrines* sanctioned, as it were, by the greatest names in ancient and modern medicine. As to the rest, the author cares only for the truth."

In that case, we will ask "the author" a question: Did or did not Dr. Dundas, twelve months, at least, before he published his "new views," read the "Fallacies of the Faculty?"—and, having read it, did he or did he not return the book to the gentleman who lent it to him, "with his compliments, and he was greatly pleased with its contents?" East, west, north, and south, we have asked what the world thinks of DR. ROBERT DUNDAS? East, west, north, and south, Echo has indignantly answered—shall we write the word?—"ROB-BER DUNDAS."*

That a great change has taken place of late years in medical practice and opinion is undeniable. To what is this change owing? To the "more enlarged experience" of medical men themselves? To "the malaria from the wood pavement?" To "tea and potatoes?" To "the cholera?" or—To the discovery of the Chrono-thermal Doctrine of Disease, thus unblushingly plagiarised by doctors of all ranks and conditions, from the highest to the humblest? Denied and decried in the first instance, the influence of the new system on the minds of the medical men of this country has already produced the most important results. Homœopathists and Allopathists alike surreptitiously profit by it in practice here; even those who still continue to deride it. Abroad the value of our labours has been more honourably acknowledged. In the United States of America upwards of four hundred practitioners, with those very distinguished men, Dr. Turner and Dr. Kent at their head, openly adopt the writer of these pages for their medical guide. In the American schools of medicine the Chrono-Thermal system is honestly taught to a rising generation of doctors. The great people of a great country have anticipated the verdict of posterity ere. From the Far West we receive by almost every ship that leaves her shores testimonials to the magnitude of our discovery—a discovery that, sooner or later, must take from medicine its reproach of centuries. For ages it has been little better than the "Destructive Art of Healing."

The following letter will speak for itself:—

Rhode Island, 13th Feb., 1853.

SAMUEL DICKSON, Esq., M.D.

MY DEAR SIR,

It affords me much pleasure to inform you that, at a meeting of the Board of Corporators and of the Faculty of the Penn Medical College of Philadelphia, you were unanimously elected Professor (Emeritus) of the Principles and Practice of Medicine.

In communicating to you the above, believe me, my dear Sir, I only express the feelings of every member of the Faculty of the Penn Medical College of Philadelphia, when I assure you that your acceptance of the position to which you have been so unanimously elected, will be a source of unalloyed pleasure to those whose teachings and practice are only the reflection of those great truths which we and the world are indebted to the author of "The Fallacies of the Faculty." You will receive, ere long, from the secretary, an official certificate of election, attested by the corporate seal of the college. Wishing you health and long life, and hoping soon to see you face to face,

I am, my dear Doctor,
Most truly and most respectfully yours,

J. EMERSON KENT,
Prof. of Mat. Med. and Gen. Therapeut. in the
Penn Med. Col. of Philadelphia,
and Chairman of Com. on Correspondence.

As the PENN MEDICAL COLLEGE is empowered by the Legislature of the State of Pennsylvania to grant degrees in medicine,

the English reader may possibly be interested in a perusal of the first Spring Announcement of an Institution which *examines* in physic on the principles and practice we have now placed before him. We give it *verbatim*.

S. DICKSON.

BOLTON STREET, PICCADILLY.

May, 1852.

Penn Medical College of Philadelphia.

INCORPORATED BY THE LEGISLATURE OF THE COMMONWEALTH OF PENNSYLVANIA, AND APPROVED BY THE EXECUTIVE, FEBRUARY 2, 1853.

President :

THE SECRETARY OF THE COMMONWEALTH, *ex officio*.

Vice-President :

DAVID HOLMES, M.D., OF RHODE ISLAND.

Emeritus Professors :

SAMUEL DICKSON, M.D., OF LONDON,
Professor of Principles and Practice of Medicine.

WILLIAM TURNER, M.D., OF NEW YORK,
Professor of Institutes of Medicine.

Faculty :

ABRAHAM LIVEZEY, M.D.,
(DEAN OF THE FACULTY)
Professor of Principles and Practice of Medicine.

J. EMERSON KENT, M.D.,
Professor of Materia Medica and Therapeutics.

SETH PANCOAST, M.D.,
Professor of Physiology and Institutes of Medicine.

JOSEPH S. LONGSHORE, M.D.,
Professor of Obstetrics, and Diseases of Women and Children.

JOHN COLEMAN, M.D., OF NEW YORK,
Professor of Principles and Practice of Surgery.

N. R. MOSELEY, M.D.,
Professor of Anatomy, General and Special.

LAWRENCE REID, Esq., OF NEW YORK,
Professor of Chemistry and Toxicology.

FURMAN SHEPPARD, Esq.,
Professor of Medical Jurisprudence.

ANNOUNCEMENT.

In presenting their first Announcement, the Faculty of the Penn Medical College calls the attention of its friends, and the friends of progress and truth, to a brief statement of the objects and plan of the Institution, and for which they ask an unprejudiced consideration.

The science of medicine can alone stand upon accurate and attentive observation and the collection of useful facts—but to these must be superadded great discrimination and the closest and most careful reasoning.

By this method Hippocrates, justly styled the father of Physic, attempted to form medicine into a Science—medicine which he found a mere chaotic mass; and had his successors continued to cultivate the art and science of physic in the same spirit in which he commenced, it would long ere this have become one of the exact sciences, and consequently have commanded the confidence of the public, instead of having merited its distrust.

But, unfortunately, the majority of his successors have not followed the course he marked out; they have almost universally deserted the study of NATURE and NATURE'S LAWS, and devoted themselves with a zeal worthy of a better cause, to the discussion of fallacious and extravagant hypotheses. In proof of this assertion we need only refer to the changing and oftentimes contradictory theories which have from time to time prevailed—theories which, however specious in their promulgation, have been ever superseded by the enunciation of a new but equally fallacious hypothesis.

In further proof of this position, thus speaks the *Dublin Medical Journal*:

“Assuredly the uncertain and most unsatisfactory art that we call medical science is no science at all,—but a mere jumble of inconsistent opinions, of conclusions hastily and often incorrectly drawn, of acts misunderstood, or perverted, of comparisons without analogy, of hypotheses without reason, and of theories not only useless, but dangerous.”

To the same point writes the eminent Lugol, of Paris:—

“Our want of success in the ordinary means of diagnosing proves that those means are inadequate—that we follow an erroneous course in our investigations.”

The great Majendie thus testifies:

“Let us no longer wonder at the lamentable want of success

which marks our practice, when there is scarcely a sound physiological principle amongst us."

Whilst Mr. Wakley, the Editor of the London *Lancet*, is compelled to exclaim:

"How little do we know of disease compared with what we have yet to learn. Every day develops new views—teaching us that many of what we before thought *immutable truths* deserved only to be classed with *baseless theories*; yet dazzled with the splendour of great names (authorities) *we adhere to them*. On these theories, which have USURPED THE PLACE OF TRUTH, a system of *routine* or *empirical* practice has grown up—*vacillating, uncertain, and often pilotless* in the treatment of disease."

And what is the result of a practice based upon *such* a system? Let those whose names are most venerated in the profession make answer. The celebrated Rusli says:

"We have multiplied diseases—we have done more, we have increased their mortality."

The illustrious Frank, equally impressed with the same truth, honestly declares "that thousands are annually slaughtered in the quiet sick room;" and Dr. James Johnson, the world known Editor of the London *Med. Chir. Review*, asserts it as "his conscientious opinion, founded on long observation and reflection, that if there were not a single physician, surgeon, &c., in the world, there would be less mortality than now prevails."

And why are these statements, thus made by the most eminent of the old schools, a living fact to-day? Because physicians prescribe from "baseless theories," and their practice is necessarily "uncertain" and "pilotless," as declared by Mr. Wakley.

Extracts like the foregoing, proving the fallacy of the present system of medicine, might be multiplied to an almost illimitable extent; and doubtless these facts led Dr. Paris to say "the file of every apothecary would furnish a volume of instances where the ingredients of the prescription are fighting together in the dark."

And do not facts like the above proclaim alike to the public, to students of medicine, and to the liberal portion of the profession, that some radical change in the teachings of the schools is imperatively demanded?—a change which shall make the practice of medicine more rational and philosophical, and therefore more successful?

Medical Colleges have long borne the reproach of a too pertinacious adherence to the dogmas of the past. They have demanded a blind submission to authority, and frowned down all efforts alike of reform and progress. The medical schools have never recognised any discoveries or improvements in the practice of the healing art until compelled to do so either from the accu-

mulated sentiment of the non-professional public, or the inherent power of the great truths which free minds and unshackled men have from time to time proclaimed.

It is not, however, difficult to understand why long-established and "time-honored institutions" should be slow to accept new truths, when it is borne in mind that they are generally first proclaimed by members of the profession whose names are at the time unknown to fame. Relying upon the doctrines and teachings of the past, and the great names which are found upon the pages of their history, their professors inculcate unconditional submission thereto;—and because they have attained a reputation, they imagine that no *new* effort is demanded at their hands, save and except an uncompromising hostility to medical progress, an unrelenting persecution of every new truth, and the most bitter denunciation of every improvement in the practice of medicine. Here duty and dignity come into collision, and the latter is a powerful motive for the rejection of new doctrines, the acceptance of which would imply the humbling admission that their prior teachings were imperfect or fallacious.

Whilst the opposition of the established schools to new doctrines has been the occasion for many to denounce the whole science of medicine, it has impressed the public mind with a very general sentiment that medicine has not kept pace with the improvements which have marked the progress of kindred sciences, and has thus prepared the way for the temporary popularity of various and fallacious hypotheses which have assumed the imposing titles of "Systems of Medicine."

The spirit of the age demands that Medical Colleges should no longer be open to this reproach; and one of the objects of the Penn Medical College is the investigation of *new doctrines*. Its Faculty will fearlessly teach those doctrines and principles which commend themselves to their judgment after close and patient examination, and which stand the trying test of practical and beneficial utility. Hence the doctrines of the past will not be venerated because of their antiquity; the systems of the past will not be received as truths on a blind faith in authorities; nor, on the other hand, will new doctrines be promulgated because of their novelty, or without the most scrutinising examination. *Fearless and free investigation* will be inscribed over the portals of the Penn College, and PROGRESS will ever be the motto upon its banners.

It will not be denied, that while the number of practitioners of medicine is annually increasing, the confidence of the public in the *practice of medicine* is about in the same ratio declining. And why has this fact existence? It is not because the integrity of the physician is called in question, but because there is a very

wide-spread doubt in the soundness and efficiency of the medical education he has received.

In Religion and Philosophy the gravest errors continued for years to exist, and to be received as the height of sublimity and reason in our Universities and Schools; and when those errors were made apparent, the schoolmen were the last to admit the fact. The same is now more than suspected to be the case with medicine. To alter the constitution of the corporations would afford no remedy for such a state of things in the schools, for in the latter, and in the Hospitals, Clinical Medicine is alone taught. —Medical Reform, therefore, must begin here,—must enquire whether the so-called *science* of our professors and teachers be fact or fiction; be a harmonious *whole*, or merely a collection of contradictory dogmas handed down, without examination, from year to year. The time has for ever passed when the teachers of any science can be permitted, as they once did, to

“Creep

Profoundly trifling,—profitlessly deep,—

Treading the steps their sires before them trod

The past their Heaven,—Antiquity their God!”

Antiquity in time is infancy in medicine. The inadequacy of the present system and practice of medicine to attain the ends it professes to accomplish, may be inferred from the daily increasing number of the educated laity who prefer the uneducated practitioner to the regularly-bred medical man; to say nothing of the many professional men who openly espouse systems and treatment completely at variance with what is called the “established system of medicine.” How could these anomalies have existence if *Truth* and *Philosophy* were really taught in our schools; if the doctrines so eloquently insisted upon by medical professors were the indisputable deduction of reason and experience? The public mind looks more at results than oratory, and is more interested in numerical cures than in fervid eloquence. Hitherto the medicine of the United States has been principally studied in the dissecting room; the human body has been taken to pieces and hair split in all its parts, whilst its *debris*, in every stage of corruption, have been subjected to analysis in the laboratory of the chemist. And to what purpose? Echo, alone, faintly answers to what purpose!—The time has fully come when the body of man must be viewed as a *living whole*; when the study of the elements of its preservation must take precedence of discussion on its *post mortem* appearances; when a correct knowledge of the agencies which beneficially influence the *living*, must be considered of more importance to humanity than the results of those which decompose the dead. We must cease to argue of the *end* as if it were the beginning,—an error which has misled all the schools even to the present hour.

The Faculty of the Penn Medical College believe in the Unity of ALL Diseases as characterised by Intermittency and Periodicity;—a principle to be distinctly avowed and sustained as a fundamental principle in medical science; a principle first suggested by Hippocrates more than twenty-three centuries ago; a living principle in harmony with the harmonies of nature and without the acknowledgment of which no system of medicine can possibly be of universal application. The teachings of the Professors of the New College, so far as the subject comes within the province of the *proper chairs*, will fully develope, maintain, prove, and defend that harmonious system of medicine which embraces the *Unity* and *Integrity* of the living body, the Intermittency and Periodicity of its functions, and the intermittency, periodicity, and changes of temperature which mark the revolutions of universal nature. *Time* or *Period* (Chronos) and *Temperature* or *Heat* (Therma) are elements of every system in nature; yet these universal elements are nowhere found in any system of medicine hitherto taught in the Schools. Such a system nevertheless exists, and for its development we are indebted to that master mind,—SAMUEL DICKSON, of London; a system which, in harmony with the universal harmony of all nature, acknowledges every power and principle in creation, and avails itself of all natural means in the treatment of disease; a system which boasts the fertility and not the paucity of its resources; which appeals from *authority* to *examination*; and, rejecting antiquated dogmas and conflicting theories, demands statistics; a system which employs little medicine, saves an immense amount of suffering, greatly shortens the duration of disease, and effects an unparalleled reduction in the number of deaths; a system from which the bleeding lancet, the leech, and every other form of blood-letting, is rejected, and rejected for reasons which are based upon indisputable truths.

In proof of the safety and universality of the application of the Chrono-thermal System, its supporters are ever ready to compare its results—its numerical cures with the curative results of all other systems—disease for disease, case for case, period of continuance with period of continuance, &c.

Little more than sixteen years have elapsed since these rational and philosophical doctrines were published to the world by their author and expositor, Dr. Dickson. Though openly and honestly embraced by a number of medical men, they have been covertly and disingenuously practised by hundreds without acknowledgment, simply because they feared the loss of medical caste, or collegiate, scholastic, or professional excommunication. The principles of medicine, as first published by Dr. Dickson, in 1836, have been already translated on the Continent of Europe, into

the French, German, and Swedish languages; and of the American reprint alone, sixteen thousand copies have been issued since the year 1846. At the present day, whether in this country or in England, scarcely a book on Physic is now issued from the press, that does not, at least indirectly, attest the truths and intrinsic value of Dickson's doctrines,—one writer copying him fragmentally on one disease, another on some other. Let us instance a few illustrations thereof.

Dr. Holland, in his "Medieal Notes and Reflections," opens the case by the following enquiry. "Has sufficient weight been assigned in our pathological reasonings to the principle which *associates together* so many facts in the history of disease, viz., the tendeney in various morbid actions to distinct *intermissions* of longer or shorter duration, and more or less perfect in kind! The subject of so many diseased actions to this *common law* establishes relations which could not have been learned from other sources, and which have much value, even in the details of practice."

Dr. Laycock, under the guise of "Vital Periodicity," admits the whole doctrines as announced by Dr. Dickson in 1836—of which doctrines the Editor of the *British and Foreign Medical Review*, Dr. John Forbes, says, "If his researches prove correct, a considerable change must necessarily take place both in the THEORY and PRACTICE of Medicine:" and though in Jan. 1843, Dr. Forbes condemns the whole doctrine of Periodicity and Intermittency, in March, 1843, the same Dr. Forbes prints the following:—"The *Intermittent nature of disease* must certainly be better understood *before we can practise medicine SCIENTIFICALLY.*"

After this sweeping admission he adds, "Dr. Holland has an interesting essay on this subject in his *Medieal Notes and Reflections*, and more recently Dr. Laycock has attempted to demonstrate a *general law of Periodicity!*" Mark the dates, 1836,—1843, and the plagiarisms from Dr. Dickson's works are self-evident.

Dr. Copland, the author of perhaps the greatest medical compilation ever published, says (1844), "it is impossible to bleed as we formerly did, by reason of the *malaria* from the wood pavement having since 1826 and '27 (when it was put down) made ALL DISEASES take on a PERIODIC TYPE!!" Thankful for his admission of the truth of our doctrines as they relate to the diseases of the British Metropolis, we ask what causes are in operation, making *all diseases* to take on a *Periodic type*, in localities and countries where these malarious wood pavements were never known?

Sir Benjamin Brodie, who has for thirty years *blindly* led the profession in the surgical part of "legitimate medicine," has

since 1850 almost entirely adopted Dickson's rational system, being now "satisfied from a more enlarged experience, that *local diseases*, in the strict sense of that word, are comparatively rare," and that consequently "the painful and loathsome torment" of the application of "setons and caustic issues," in joint diseases and in "caries of the spine," is not only "*not useful, but actually injurious*." But hear Sir Benjamin himself (in 1850) maintain one of the distinctive doctrines of our new and harmonious system.—"Every thing," says he, "tends to prove that in the great majority of cases there is a morbid condition of the system *antecedent* to the manifestation of disease in any particular structure;" and he now makes use of our distinctive remedies "with the happiest results;" and declares that thereby many cases are curable, which would have remained incurable—treated by the barbarous and loathsome measures he had himself for thirty preceding years been advocating! In connection with the testimony of Sir B. Brodie, we may add the evidence of Wm. Coulson, Esq., F.R.C.S., who says, "I have often witnessed the *periodical changes mentioned by Sir B. Brodie*, affecting either the joint or even the whole limb. In the morning it is cold, pale, and shrunken—towards evening there is evidence of a more active circulation, and the skin is evidently red, hot, and shining. During the night the heat and redness subside, and *these alternations are as regular as the paroxysms of an AGUE*."

Dr. Henry Holland, in his notice of "Morbid Actions of an Intermittent Kind," observes, "This tendency to *Intermission* in the animal functions may justly be termed a LAW, inasmuch as it is natural, *general*, and manifestly designed."

Dr. Marshall Hall has abandoned his "reflex" doctrines, and adopted a "Diastaltic theory of medicine," based on certain asserted eccentric and concentric movements, which he says "have for their root the word *Periodic*:" and refers to the application of alternation of temperature, of relative heat and cold, as being the "Clue of Ariadne," "the true guide" in the "labyrinth" of disease.

Thus have the great truths, first publicly announced by Dickson in 1836, changed the entire British Medical Practice. Can higher evidence of the value of these doctrines and the influence they have already attained be adduced?

We must, for the present, pass by Drs. Ashburner, Radcliffe, Christison, and Bushnan of the London *Medical Times*, as well as other stars of less brilliancy, and ask how stands this matter amongst the Profession in the United States?

In the May number of *The Western Lancet*, published at Lexington, Ky., nearly three years ago, is a leading article from the pen of Thomas D. Mitchell, M.D., then the Professor of Mat.

Med. and Therap. in the Transylvania University, in which he declares, "The doctrine that all fevers and *all diseases* are essentially *Intermittent*, has long been before the public (but neither received by the public or the profession) and while we are ignorant of the nature and source of *Periodicity*, the fact of *Intermittency* is as well established as any other in medicine." Applying this position to fevers, Prof. M. says, "Well aware that the idolators of a *false diagnosis based upon imaginary lesions* which have no practical bearing in the case, will stand aghast at this announcement,—I feel it my duty to present the facts as history, not away off in England, but here in our own land, exhibits them."

Dr. S. H. Dickson, now of So. Ca. University, Charleston, taught most impressively the Law of the Periodicity of all Diseases, and was crowded out of his Professorship in the University of New York, because he taught that important medical truth, so unpalatable to those whose teachings reflect only the fallacies of the past; and Prof. Edw. H. Dixon, Editor of the *New-York Scalpel*, announced recently in that journal, that he had made considerable progress in the investigation of the Periodicity of all disease; his progress dates 1849, twelve years after Samuel Dickson, of London, had indisputably proved the doctrines the Editor of the *Scalpel* was investigating. At the present time there is scarcely a State in our Union in which Dickson's doctrines have not their fearless advocates and successful practitioners, and their number is annually increasing.

The authorities we have quoted, and they might be multiplied to the extent of a volume, all attest the truth of the doctrine of the Periodicity of Health and Disease, and the Medical Profession can no longer meet us with the weapons of contempt; *their* most illustrious and most unquestioned men *are with us*, and they must henceforth stand or fall on the *real merits* of our respective doctrines. Whilst *we* reject the use of lancet, leech, and scarificator, the teachings and text-books of "Legitimate Medicine," commend "general or local depletion" in the treatment of almost every form of disease; and if the malady prove obstinate, "mercurials" are to be pushed to *ptyalism*; they have never directed the attention of students to the Intermission of all disease, without a knowledge of which Dr. Forbes declares that no physician "can practise medicine scientifically."

In conclusion, the Faculty of the Penn Medical College would say that, with a *part* of the Profession, they have long since accepted and practically tested the doctrines here set forth; and they propose to establish a *clinique* where this philosophical and rational system may be fully and practically illustrated in connection with the teachings of that institution. But whilst they give to these doctrines that prominence their truth and importance de-

mands, they do not reject any well-founded principle that may now have place in the Practice of Medicine: they purpose to investigate everything pertaining to the advancement of the profession of physic, and their best formed opinions will become the possession of their classes.

COURSE OF INSTRUCTION.

The First Session will commence the first Monday in March, and continue thirteen weeks.

In shortening the duration of the sessions of the Penn Medical College, the Faculty are acting under a sense of duty and conviction. They are convinced that the principles of a rational and philosophical system of medicine—simple because rational and philosophical—can be fully developed in a term of thirteen weeks, more especially where those principles are distinctly separated from all speculative theories; and they believe that duty demands that all needless expenditure of the student's time and resources should be scrupulously avoided, and that a longer protracted absence from home and its social restraints should be scrupulously discountenanced.

The sessions of the Penn Medical College will be full of interest to their close, for the several Professors will not weary the student with *speculative nothings* long drawn out, merely to occupy the hours daily assigned in the continuance of a longer term; hours which could be more profitably employed both by student and instructor in other researches.

"Quality, not quantity," is the motto of the Faculty; they are to be the exponents of *living truths*, whilst obsolete and useless theories are to be discarded. The *sublimity of fact* is to be inculcated, and not the visionary speculations of conjecture.

A general Introductory Lecture will be delivered by Prof. Abraham Livezey in the Hall of the College, on the afternoon of the first day of the Session, commencing at 4 o'clock; and the several Courses will continue throughout the term, in the following order:—

Hours.	Monday.	Tuesday.	Wednesday.	Thursday.	Friday.	Saturday.
9—10	Anatomy	Anatomy.		Anatomy.	Anatomy.	
10—11	Principles & Practice.	Prin. & Prac.	} Hospital {	Prin. & Prac.	Prin. & Prac.	} Hospital.
11—12	Obstetrics	Obstetrics.		Obstetrics.	Ob-tetrics.	
12—1	Mat. Med. & Ther.	Mat. Med. & Ther.	Med. & Surg Clinique.	Mat. Med. & Ther.	Mat. Med. & Ther	Med & Surg Clinique.
3—4	Physiology.	Physiology.		Physiology.	Physiology.	
4—5	Surgery.	Surgery.	Anatomy.	Surgery.	Smgery.	Anatomy.
5—6	Chemistry.	Chemistry		Chemistry.	Chemistry.	

The above arrangement affords such students as may desire to avail themselves thereof, leisure to attend the Hospital, or the hours designated may be profitably spent in study or review.

1. PRINCIPLES AND PRACTICE OF MEDICINE.

This Chair will be filled by Dr. Livezey, for some years past the incumbent of that Chair in the Fem. Med Col. of Penn. He will illustrate the principles of the Chrono-Thermal doctrine of Dickson by reference to cases without limit, in which its superiority has been proven during an experience of many years, in an extensive practice, and in a locality favourable for the development of most of the diseases incident to our climate and country.

Dr. L. will also avail himself of an extensive correspondence, and of reports from Hospital, Army and Navy Surgeons, all in attestation of the truth and superiority of this over all the systems of the past.

The Course will be further illustrated by Pathological specimens, Diagrams, and a splendid series of paintings in elucidation of the Exanthemata, Cutaneous Diseases, &c., and it will be his especial aim to combine interest with useful instruction.

2. MATERIA MEDICA AND THERAPEUTICS.

Dr. J. Emerson Kent will give a complete Course on Materia Medica, in which the natural and commercial history, modes of preparation and administration of the articles therein embraced will be fully detailed. He will illustrate this department of his subject by reference to an ample collection of genuine and spurious drugs, drawings, &c.

The Therapeutical powers of the various remedies described, will be given with special reference to their Thermal or Electric action, and he will explain the reasons of the diverse action of the same remedy, a result which has heretofore remained wholly unexplained in Lectures on this department of study.

Dr. K. will also introduce to the acquaintance of the class all the most recent remedial agents, and will describe some *new* and most beneficial adaptations of older ones. In connection with the remarks on Sedatives, Blood-letting, &c., he will expose the fallacies of the theory of Inflammation; and also show that Calomel is no longer to be considered the Practitioner's most important remedial agent.

*Professor Rho
Univer.*

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